PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docker Number

| مب• | CLAIMS | CLAIMS AS FILED - PART I | | | 112467 |
|--|--|--|---|--|-------------------------------|
| | TOTAL CLAIMS | (Column 1) | (Column 2) | SMALL ENTITY | OTHER THAN |
| | FOR | , | | I Division | OH SMALL ENTITY |
| | | NUMBER FILED | NUMBER EXTRA | BASIC FEE | RATE FEE |
| | TOTAL CHARGEABLE CLAIMS | minus 20= | • | - ONSIC FEE | OR BASIC FEE |
| | INDEPENDENT CLAIMS | minus 3 = | | X\$ 25 = | OR X\$50= |
| | MULTIPLE DEPENDENT CLAIM PR | ESEINT | 7 | X100= | OB X200= |
| | fill the difference in column 1 is le | ese than any | | +180= | |
| - 1 | CLAIMS AC AL | ss man zero, enter (|), iu colnusu s | TOTAL | OR +360= |
| $-I_{l}$ | Column 1) | IENDED - PART I | | | OR TOTAL |
| - 11 | A A CLAIMS T | Column HIGHEST | 1,4 3,5,1,1,1,1,1 | SMALL ENTITY | OTHER THAN OR SMALL ENTITY |
| | AMENDMENT | PREVIOUS | Y EXTON | RATE TIONAL | ADD). |
| | Total REMAINING AFTER AMENDMENT Mindependent | PAID FOR | <i>/~1</i> | RATE MONAL FEE | HATE TIONAL |
| | | nus 3 | 51 | X\$ 25= | OA X\$50 = 2550 |
| 1 | FIRST PRESENTATION OF MULTI | PLE DEPENDENT CLA | 11.1 | 2.100. | 1300 |
| 1 | | | —————————————————————————————————————— | +180= | 3600 |
| 1_ | - (Columna) | | | TOTAL | R +360= 360 |
| <u>m</u> | (Column 1) CLAIMS REMAINING | (Column 2) | (Column 3) | ADON, FEE OI | 400IT FEE 55/0 |
| IEN | 121/06 AFTER AMENDMENT | PREMOUSLY | PRESENT | ADDI. | PD |
| AMENDMENT B | Total . 68 Minus | PAID FOR | EXTRA. | RATE TIONAL FEE | HATE TIONAL |
| AME | Independent . | | | X\$ 25± OR | X\$50= FE |
| <u>!</u> | FIRST PRESENTATION OF MULTIPLE | DEPENDENT CLAIM | | K100= | · |
| | | | | 160: OR | X200= |
| | | | L | TOTAL | +360= |
| ا ن | (Column 1) CLAIMS | (Column 2) (| Abb Dolumn 3) | OR A | DOLL REE |
| NU - | AELER . | HIGHEST | PRESERT | 100 | |
| Tol | AMENDMENT | PARTOUSE . PAID FOR | | ADDI. STE TIONAL | RATE TIONAL |
| - | Minus | = | | —————————————————————————————————————— | RATE TIONAL FEE |
| | | 444 5 | X\$: | 25 = OR X | \$50= |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | |
| If the uniquip column is | | | | | |
| If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 150 The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 150 The "Highest Number Previously Paid For" IN THIS SPACE is less than 2 enter 150 ACTIF FEE OH 1360= OH 1074L AUDIT FEE | | | | | |
| ous a | Ighest (tumber Previously Paid For II) TH | io oract is less than a e Independent is the filler | aterina — ACTAT F Taraharina na mana | OH ADON | 1 FEC |
| | | | . cent up | High the state force to the | í |